PATENT APPLICATION FEE DETERMINATION REC

Application or Docket Number 10/519405

CLAIMS AS FILED - PART I								SMALL ENTITY					
_			(Column 1)			Column 2)		SMALL ENTITY TYPE		OR		OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES								RATE	FEE	7	RATE	FEE	
BAS	SIC FEE		SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300	7	BASIC FEE		OR	BASIC FEE	300	
EXA	MINATION FE	E	Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100			ther situations = 100 / \$ 200	1	EXAM. FEE	 	1	EXAM. FEE	200	
SEA	ARCH FEE		U.S. is ISA = : ALL other co \$ 200 / \$	untries =		ther situations = 3250 / \$ 500		SEARCH FEE		1	SEARCH FEE	400	
FEE	FOR EXTRA S	SPEC. PGS.	min	us 100 =		/ 50 =	7	X \$ 125 =	ļ	1	X \$ 250 =	 	
тот	AL CHARGEA	BLE CLAIMS	15 mi	nus 20 =	*		1	X \$ 25 =		OR	X \$ 50 =		
IND	EPENDENT CL	AIMS	2 n	ninus 3 =	*		1	X \$ 100 =		OR	X \$ 200 =		
MUL	TIPLE DEPEN	DENT CLAIM PR	ESENT				1	+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2						lumn 2		TOTAL	 	OR	TOTAL	900	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							7 /	SMALL E	NTITY	OR	OTHER SMALL E		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	·	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT.		
		(Column 1)		(Colum	n 2\	(Column 2)		•					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBE PREVIOU PAID FO	ST ER JSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT. FEE										OR L	TOTAL ADDIT. FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" (N THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" (N THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													